	Application No.	**Applicant(s)**
Interview Summary	09/753,931	IRUELA ET AL.
	Examiner	**Art Unit**	
	Anh-Vu H. Ly	2667	

All participants (applicant, applicant's representative, PTO personnel):

(1) *Anh-Vu H. Ly*.　　　　　　　　　　　　(3)＿＿＿.

(2) *Joscelyn G. Cockburn*.　　　　　　　　　(4)＿＿＿.

　　Date of Interview: *15 August 2005*.

　　Type:　a)☒　Telephonic　　b)☐　Video Conference
　　　　　　c)☐　Personal [copy given to: 1)☐ applicant　　2)☐ applicant's representative]

Exhibit shown or demonstration conducted:　d)☐ Yes　　e)☒ No.
　　If Yes, brief description: ＿＿＿＿.

Claim(s) discussed: *19*.

Identification of prior art discussed: *N/A*.

Agreement with respect to the claims f)☒ was reached.　g)☐ was not reached.　h)☐ N/A.

Substance of Interview including description of the general nature of what was agreed to if an agreement was reached, or any other comments: *Independent claim 19, as filed June 16, 2005, included the rejected dependent claim 18, instead of objected dependent claim 19. Therefore, independent claim 19 will be amended by the examiner's amendment to include the limitation as recited in the original objected dependent claim 19 to place the application in the condition for allowance.*

(A fuller description, if necessary, and a copy of the amendments which the examiner agreed would render the claims allowable, if available, must be attached. Also, where no copy of the amendments that would render the claims allowable is available, a summary thereof must be attached.)

THE FORMAL WRITTEN REPLY TO THE LAST OFFICE ACTION MUST INCLUDE THE SUBSTANCE OF THE INTERVIEW. (See MPEP Section 713.04). If a reply to the last Office action has already been filed, APPLICANT IS GIVEN ONE MONTH FROM THIS INTERVIEW DATE, OR THE MAILING DATE OF THIS INTERVIEW SUMMARY FORM, WHICHEVER IS LATER, TO FILE A STATEMENT OF THE SUBSTANCE OF THE INTERVIEW. See Summary of Record of Interview requirements on reverse side or on attached sheet.

Examiner Note: You must sign this form unless it is an Attachment to a signed Office action.

_____
Examiner's signature, if required